

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear	General										
	<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain	<input type="checkbox"/> Ovalized	<input type="checkbox"/> Pressure/Forced						
	<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Temperature/Cure						
	<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Weld						
	<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Wrong Stock Pulled						
	<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Part Moved							
	<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Positioned Wrong							
	<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread	<input type="checkbox"/> Power Loss/Surge							
	<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset								
	<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration								
	<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence								
	<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions								

Work Order ID 107237

September-23-13 11:36:15 AM

107237

Page 2

Item ID: D3913-041

Accept

N900040100

Setup

Start

NS1

Revision ID:

Item Name: Long Basket Base Assemby, 350

Stop

NS2

Start Date: 10/02/13 **Start Qty:** 1.00

1

Cust Item ID:

Required Date: 10/07/13 **Req'd Qty:** 1.00

1

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run

Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

**Sequence ID/
Work Center ID**

**Operation
Description**

**Set Up/
Run Hours**

Tool ID

Tool #

**Plan
Code**

**Accept
Qty**

**Reject
Qty**

**Reject
Number**

**Insp.
Stamp**

120

QC5- Inspect part completeness to step on W/O

0.00

13-11-01

DAS

9

120

QC

Quality Control

125

Pressure Wash per QSI005 4.3

0.00

1

13-11-4

125

HandFinish

Hand Finishing

Memo

0.00

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order:			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
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			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear	General										
	<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain	<input type="checkbox"/> Ovalized			<input type="checkbox"/> Pressure/Forced				
	<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware	<input type="checkbox"/> Over/Under tolerance			<input type="checkbox"/> Temperature/Cure				
	<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Part Incorrect			<input type="checkbox"/> Weld				
	<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost/Missing			<input type="checkbox"/> Wrong Stock Pulled				
	<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Part Moved							
	<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Positioned Wrong							
	<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread	<input type="checkbox"/> Power Loss/Surge							
	<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset								
	<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration								
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence									
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions									

Work Order ID 107237

September-23-13 11:36:15 AM

107237

Page 3

Item ID: D3913-041

Accept

N900040100

Setup

Start

NS1

Revision ID:

Item Name: Long Basket Base Assemby, 350

Start Date: 10/02/13 **Start Qty:** 1.00 ***1***

Cust Item ID:

Required Date: 10/07/13 **Req'd Qty:** 1.00 ***1***

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run

Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

**Sequence ID/
Work Center ID**

130

130

Powdercoat

Powder Coating

**Operation
Description**

White Gloss(Ref:4.3.5.2) per QSI005 4.3-Steel

**Set Up/
Run Hours**

0.00

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

1 0 13-11-4 DAS
34
9-89

Memo

0.00

1- Plug holes and mask only interior of hinge (3) prior to powder coat

m136829

1ST COAT:

START TIME: *12:00*

OVEN TEMPERATURE: *400*

FINISH TIME: *2:00*

***** 2nd coat if necessary *****

2ND COAT:

START TIME: _____

OVEN TEMPERATURE: _____

FINISH TIME: _____

140

140

QC

Quality Control

QC3- Inspect Part Finish

0.00

Memo

0.00

1x 0 13/10/04

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS						
			Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Use-as-is <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>			
Part No. _____			Machining <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
NCR No. _____			Work Order Update <input type="checkbox"/>	Finishing <input type="checkbox"/>	Composite <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Supplier <input type="checkbox"/>	Other <input type="checkbox"/>				
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data												
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FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
											<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled	
											<input type="checkbox"/> Other	

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____				DISPOSITION		AGAINST DEPARTMENT/PROCESS					
				Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>			
Part No. _____											
NCR No. _____											
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear				General							
Bending				Bend <input type="checkbox"/>	Grain <input type="checkbox"/>	Ovalized <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>				
Centre Not Concentric to O/S				BOM/Route <input type="checkbox"/>	Hardware <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>				
Cracks				Broken/Damaged <input type="checkbox"/>	Inspection Incomplete <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Weld <input type="checkbox"/>				
Crushed/Crimped				Burrs <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>				
Cuffs				Contamination <input type="checkbox"/>	Maintenance <input type="checkbox"/>	Part Moved <input type="checkbox"/>					
Heat Treat				Countersink <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>					
Inspection Strip in Tube				Cut Too Short <input type="checkbox"/>	Misread <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>					
Ripples in Bend				Drill Holes <input type="checkbox"/>	Offset <input type="checkbox"/>	Other <input type="checkbox"/>					
Torque Waves in Extrusion				Drawing <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>						
Turning Sequence				Finish <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>						
Wave/Twist in Tube				Folio <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>						

Work Order ID 107237

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107237

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Item ID: D3913-041

Accept

N900040100

Setup

Start

NS1

Revision ID:

Item Name: Long Basket Base Assembly, 350

Stop

NS2

Start Date: 10/02/13 **Start Qty:** 1.00 ***1***

Cust Item ID:

Required Date: 10/07/13 **Req'd Qty:** 1.00 ***1***

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run

Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

**Sequence ID/
Work Center ID**

**Operation
Description**

**Set Up/
Run Hours**

Tool ID

Tool #

**Plan
Code**

**Accept
Qty**

**Reject
Qty**

**Reject
Number**

**Insp.
Stamp**

180

QC21- Final Inspection - Work Order Release

0.00

180

QC

Quality Control

Memo

0.00

[Signature] / Rm 13/11/07

MF
13-11-05

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS							
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>						
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>						
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>						
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>							
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector				
Doc/Data													
Equip/Tooling													
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Material													
Setup													
Other													
Process													
Supplier													
Training													
Unapproved													
FAULT CATEGORY													
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions						<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other			

Picklist Print

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Work Order ID:	107237	Start Date:	10/02/13	Required Date:	10/07/13
Parent Item:	D3913-041	Start Qty:	1.00	Required Qty:	1.00
Parent Item Name:	Long Basket Base Assembly, 350				

Comments: IPP Rev:A new issue DD 10.03.19 verified by:EC IPP Rev:B chg qty's DD 10.04.12
verified by:EC IPP REV:C 12.07.24 AS PER DWG REV.B DD VERF:EC IPP
REV:D 13.08.21 DWG REV.C / ECN 13-624 DD VERF:JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D3913-1 Rib		Manufactured	No Z 103755 1 97979			100	Each	9.0000	1	1		CC 13-10-31	
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				WA		1							
				97979		1							
				WA005		8							
				100460		7							
				88637		1							
D3913-3 Rib		Manufactured	No <i>O Left</i>			100	Each	10.0000	1	1		CC 13-10-31	
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				WA004		1							
				100442		1							
				WA005		9							
				100443		7							
				69160		1							
				84651		1							
D3913-7 Rib		Manufactured	No			100	Each	12.0000	2	2		CC 13-10-31	
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				WA004		11	<i>B94828</i>						
				100483		4							
				101023		4							
				99781		3							
				WA006		1							
				100482		1							

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
Part No. _____	Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>					
NCR No. _____	Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>						
	Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
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Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio		<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <hr/> <hr/> <hr/>	
										<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled	
										<input type="checkbox"/> Other	

Picklist Print

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Page 2

Work Order ID: 107237

Parent Item: D3913-041

Parent Item Name: Long Basket Base Assembly, 350

Start Date: 10/02/13

Required Date: 10/07/13

Start Qty: 1.00

Required Qty: 1.00

D3913-9

Manufactured

No

100

Each

4.0000

1

1

Hinge Rib

CC 13-10-31

Location

WA004
102353
WA005
70138

Loc Qty

3
3
1
1

Loc Code

B100305 →

(1x)

D3916-5

Light Rib

Manufactured

No

100

Each

18.0000

3

3

CC 13-10-31

Location

WA004
104316
94698
WA005
103589
103590
77142
82933

Loc Qty

3
1
2
15
6
4
1
4

Loc Code

B107318 →

(3x)

D3916-041

Rib Assembly

Manufactured

No

100

Each

10.0000

2

2

CC 13-10-31

Location

WA004
100359
WA005
81444

Loc Qty

8
8
2
2

Loc Code

B102868 →

(2x)

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____	DISPOSITION	AGAINST DEPARTMENT/PROCESS					
Part No. _____	Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>		
NCR No. _____	Work Order Update <input type="checkbox"/>						

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General									
Bending	<input type="checkbox"/>	Bend	<input type="checkbox"/>	Grain	<input type="checkbox"/>	Ovalized	<input type="checkbox"/>	Pressure/Forced		
Centre Not Concentric to O/S	<input type="checkbox"/>	BOM/Route	<input type="checkbox"/>	Hardware	<input type="checkbox"/>	Over/Under tolerance	<input type="checkbox"/>	Temperature/Cure		
Cracks	<input type="checkbox"/>	Broken/Damaged	<input type="checkbox"/>	Inspection Incomplete	<input type="checkbox"/>	Part Incorrect	<input type="checkbox"/>	Weld		
Crushed/Crimped	<input type="checkbox"/>	Burrs	<input type="checkbox"/>	Instructions Incomplete/Unclear	<input type="checkbox"/>	Part Lost/Missing	<input type="checkbox"/>	Wrong Stock Pulled		
Cuffs	<input type="checkbox"/>	Contamination	<input type="checkbox"/>	Maintenance	<input type="checkbox"/>	Part Moved	<input type="checkbox"/>			
Heat Treat	<input type="checkbox"/>	Countersink	<input type="checkbox"/>	Mislabeled	<input type="checkbox"/>	Positioned Wrong	<input type="checkbox"/>			
Inspection Strip in Tube	<input type="checkbox"/>	Cut Too Short	<input type="checkbox"/>	Misread	<input type="checkbox"/>	Power Loss/Surge	<input type="checkbox"/>	Other		
Ripples in Bend	<input type="checkbox"/>	Drill Holes	<input type="checkbox"/>	Offset						
Torque Waves in Extrusion	<input type="checkbox"/>	Drawing	<input type="checkbox"/>	Out of Calibration						
Turning Sequence	<input type="checkbox"/>	Finish	<input type="checkbox"/>	Out of Sequence						
Wave/Twist in Tube	<input type="checkbox"/>	Folio	<input type="checkbox"/>	Outside Dimensions						

Picklist Print

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Page 3

Work Order ID: 107237

Parent Item: D3913-041

Parent Item Name: Long Basket Base Assembly, 350

Start Date: 10/02/13

Required Date: 10/07/13

Start Qty: 1.00

Required Qty: 1.00

D4017-7
Rib

Manufactured

No

100

Each

9.0000

3

3

CC 13-10-31

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
WA004	5	B106799 → (3x)
	5	
WA005	4	
	1	
	1	
	1	
	1	
	1	

D4017-9
Rib

Manufactured

No

100

Each

17.0000

2

2

CC 13-10-31

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
WA004	10	B10699
	10	
WA005	7	B106922 → (2x)
	4	
	2	
	1	

D4034-041
Aft Upper Rib Assembly

Manufactured

No

100

Each

7.0000

1

1

CC 13-10-31

3 Left

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
WA004	6	
	2	
	4	(X)
WA005	1	
	1	

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: Date: , .

QA Closed: Date:

Work Order: _____				DISPOSITION		AGAINST DEPARTMENT/PROCESS					
				Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>			
Part No. _____											
NCR No. _____											
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear				General							
Bending				Bend				Grain			
Centre Not Concentric to O/S				BOM/Route				Hardware			
Cracks				Broken/Damaged				Inspection Incomplete			
Crushed/Crimped				Burrs				Instructions Incomplete/Unclear			
Cuffs				Contamination				Maintenance			
Heat Treat				Countersink				Mislabeled			
Inspection Strip in Tube				Cut Too Short				Misread			
Ripples in Bend				Drill Holes				Offset			
Torque Waves in Extrusion				Drawing				Out of Calibration			
Turning Sequence				Finish				Out of Sequence			
Wave/Twist in Tube				Folio				Outside Dimensions			
<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Other											
<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled											

Picklist Print

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Page 4

Work Order ID: 107237

Parent Item: D3913-041

Parent Item Name: Long Basket Base Assembly, 350

Start Date: 10/02/13

Required Date: 10/07/13

Start Qty: 1.00

Required Qty: 1.00

D4034-043 Fwd Upper Rib Assembly	Manufactured	No	100	Each	9.0000	1	1	<u>CC 13-10-31</u>
-------------------------------------	--------------	----	-----	------	--------	---	---	--------------------

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
WA	1	B105994
103421	1	
WA004	5	
104209	5	
WA005	3	
103355	1	
82980	2	

(X)

D2581 Mounting Bracket	Manufactured	No	100	Each	103.0000	2	2	<u>CC 13-10-31</u>
---------------------------	--------------	----	-----	------	----------	---	---	--------------------

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
WA004	103	
103076	24	
103952	17	
105886	48	
70766	2	
81253	1	
82506	2	
83230	3	
85452	2	
87706	2	
99837	2	

(Z)

D2931 Bumper	Manufactured	No	150	Each	2,122.0000	2	2	<u>DAS 32 9-89 13/11/4 (1)</u>
-----------------	--------------	----	-----	------	------------	---	---	--------------------------------

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
GA	124	
46064	124	
ST021	1998	
86435	1998	

46064

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: Date: , ,

QA Closed: Date:

Work Order: _____				DISPOSITION		AGAINST DEPARTMENT/PROCESS							
				Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>					
Part No. _____													
NCR No. _____													
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector				
Doc/Data													
Equip/Tooling													
Operator													
Material													
Setup													
Other													
Process													
Supplier													
Training													
Unapproved													
FAULT CATEGORY													
Landing Gear				General									
<input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions						<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled	
												<input type="checkbox"/> Other	

Picklist Print

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Page 5

Work Order ID:	107237	Start Date:	10/02/13	Required Date:	10/07/13			
Parent Item:	D3913-041							
Parent Item Name:	Long Basket Base Assemby, 350		Start Qty:	1.00	Required Qty:	1.00		
D3913-15 Wide Handle Plate	Manufactured	No	100	Each	9.0000	1	1	<u>CC 13-10-31</u>
			<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>			
			WA004	9	B107769	→	(1X)	
			104675	4				
			97719	5				
D4016-1 Hinge Half, Base	Manufactured	No	100	Each	68.0000	3	3	<u>CC 13-10-31</u>
			<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>			
			WA004	68	B107563	→	(3X)	
			103414	28				
			104200	20				
			106646	20				
D4021-1 Handle Plate	Manufactured	No	100	Each	55.0000	3	3	<u>CC 13-10-31</u>
			<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>			
			WA004	55				
			100366	8				
			100649	4				
			103509	25				
			105883	15				
			94596	3				
D4021-5 Blanking Plate	Manufactured	No	100	Each	34.0000	2	2	<u>DAS</u> <u>32</u> <u>9.89</u> <u>13/11/17</u> (6)
			<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>			
			ST084	34				
			103399	27				
			103829	6				
			85065	1				
					<u>103399</u>			

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: Date:

Work Order: _____	DISPOSITION	AGAINST DEPARTMENT/PROCESS				
Part No. _____	Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>	
NCR No. _____	Work Order Update <input type="checkbox"/>					

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear		General									
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain	<input type="checkbox"/> Ovalized	<input type="checkbox"/> Pressure/Forced							
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Temperature/Cure							
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Weld							
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Wrong Stock Pulled							
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Part Moved								
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Positioned Wrong								
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread	<input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Other							
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset									
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration									
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence									
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions									

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS										
Part No. _____	Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>									
NCR No. _____	Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>										
	Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>										
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector						
Doc/Data															
Equip/Tooling															
Operator															
Material															
Setup															
Other															
Process															
Supplier															
Training															
Unapproved															
FAULT CATEGORY															
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio		<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled			
														<input type="checkbox"/> Other	

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS										
Part No. _____	Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>									
NCR No. _____	Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>									
	Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Supplier <input type="checkbox"/>	Other <input type="checkbox"/>									
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector						
Doc/Data															
Equip/Tooling															
Operator															
Material															
Setup															
Other															
Process															
Supplier															
Training															
Unapproved															
FAULT CATEGORY															
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio		<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled			
														<input type="checkbox"/> Other	

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Work Order ID:	107237	Parent Item:	D3913-041	Start Date:	10/02/13	Required Date:	10/07/13
Parent Item Name:	Long Basket Base Assemby, 350			Start Qty:	1.00	Required Qty:	1.00
NAS1149F0332P Washer	Purchased	No		150	Each	8,538.0000	12
							12
							^{DAS} 32 9.89
AN3-10A Bolt	Purchased	No	<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>		
			GA	182			
			122063	182			
			ST294	158			
			122063	158			
			ST295	3			
			123352	3			
			st510	3195			
			123900	3195			
			ST510a	5000			
			125646	5000			
			150	Each	350.0000	6	
						6	^{DAS} 32 9.89
AN960JD8 Washer	NAS1149DN832J	Purchased	No	<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>	
				ST351	14		
				124221	3		
				124858	11		
				ST513	336		
				m125709	336		
				150	Each	0.0000	2
							³² 2 319
							^{9.89} 9.89
							^{DAS}

NCR: Yes / No

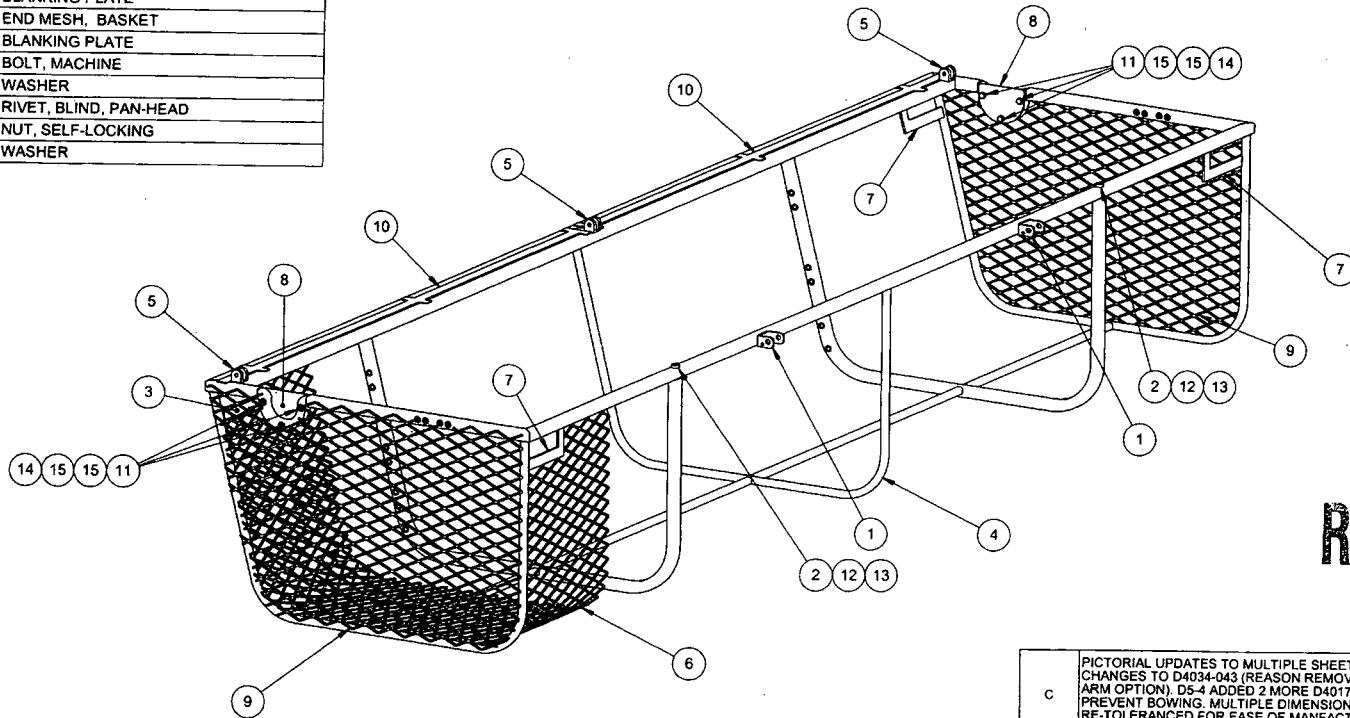
DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework Scrap Use-as-is Work Order Update	Skid-tube Machining Thermoforming Large Fab	Crosstube Small Fab Finishing Composite	Water Jet Prod. Eng. Coor. Rec/Store/Packaging Supplier	Engineering Quality Other				
Part No. _____											
NCR No. _____											
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear				General							
Bending	General			Grain	General			Ovalized	Pressure/Forced		
Centre Not Concentric to O/S	Bend	General			Hardware	General			Over/Under tolerance	Temperature/Cure	
Cracks	BOM/Route	General			Inspection Incomplete	General			Part Incorrect	Weld	
Crushed/Crimped	Broken/Damaged	General			Instructions Incomplete/Unclear	General			Part Lost/Missing	Wrong Stock Pulled	
Cuffs	Burrs	General			Maintenance	General			Part Moved		
Heat Treat	Contamination	General			Mislabeled	General			Positioned Wrong		
Inspection Strip in Tube	Countersink	General			Misread	General			Power Loss/Surge		
Ripples in Bend	Cut Too Short	General			Offset	General					
Torque Waves in Extrusion	Drill Holes	General			Out of Calibration	General					
Turning Sequence	Drawing	General			Out of Sequence	General					
Wave/Twist in Tube	Finish	General			Outside Dimensions	General					
	Folio	General				General					

ITEM	QTY	P/N	DESCRIPTION
	X	D3913-041	LONG BASKET BASE ASSY (350)
1	2	D2581	MOUNTING BRACKET
2	2	D2931	BUMPER
3	1	D3913-15	WIDE HANDLE PLATE
4	1	D3913-101	TUBULAR ASSY (350 LONG BASKET)
5	3	D4016-1	HINGE HALF, BASE
6	1	D4020-1	MESH (350 BASKET LONG BASE)
7	3	D4021-1	HANDLE PLATE
8	2	D4021-5	BLANKING PLATE
9	2	D4020-11	END MESH, BASKET
10	2	D4672-1	BLANKING PLATE
11	6	AN3-10A	BOLT, MACHINE
12	2	AN960JD8	WASHER
13	2	MS20600AD4W3	RIVET, BLIND, PAN-HEAD
14	6	MS21042L3	NUT, SELF-LOCKING
15	12	NAS1149F0332P	WASHER



D3913-041 LONG BASKET BASE ASSY (350)
(MESH SHOWN LOCALLY FOR CLARITY)

NOTES:

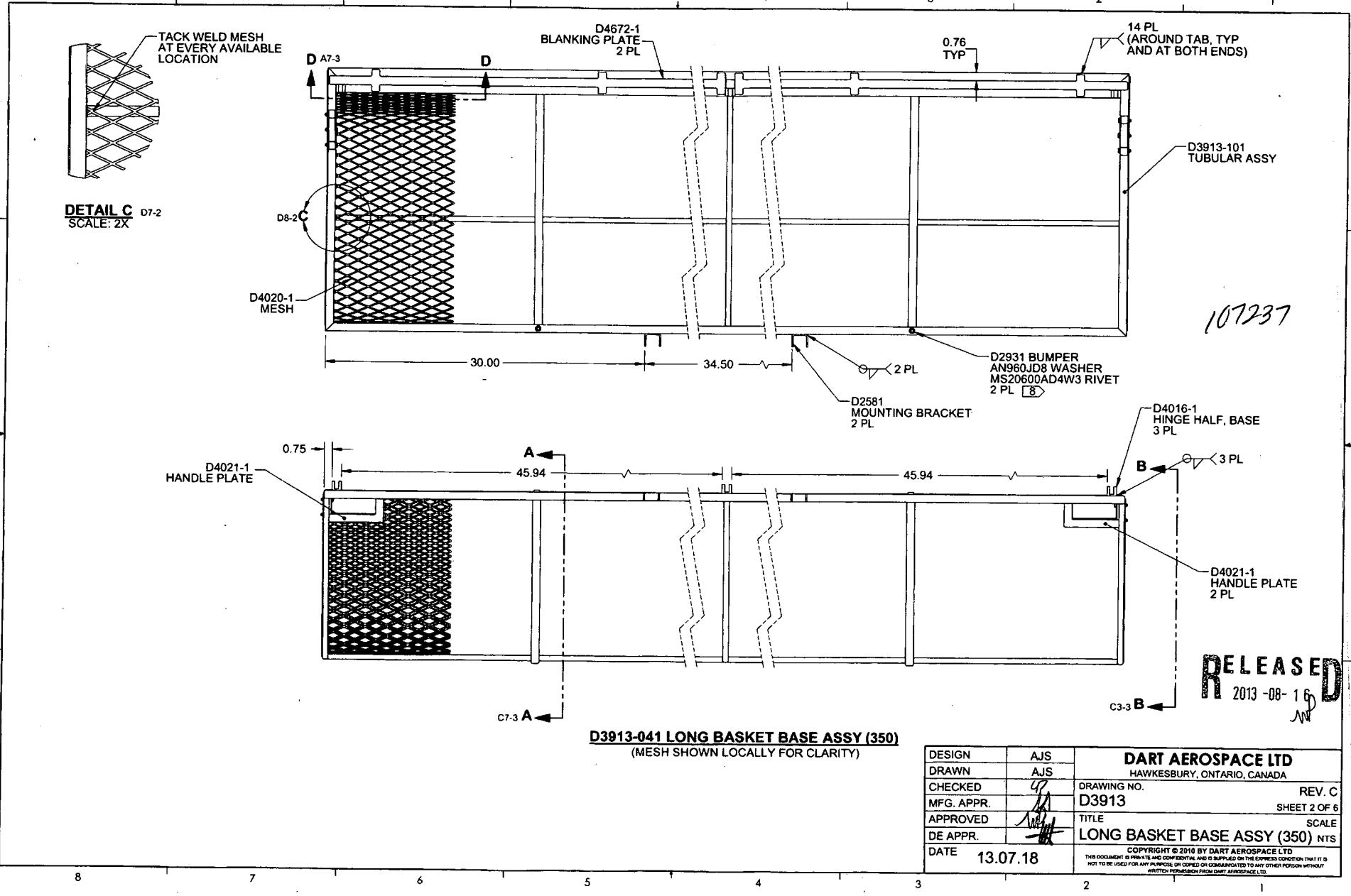
- 1) MATERIAL: N/A
- 2) FINISH: POWDER COAT WHITE (4.3.5.2) PER DART QSI 005 4.3
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: NONE
- 7) WEIGHT: 43.9 lbs APPROX
- 8) INSTALL AFTER FINISH
- 9) MASK HOLES PRIOR TO POWDER COAT
- 10) WELD PER DART QSI 004

C	PICTORIAL UPDATES TO MULTIPLE SHEETS FOR CHANGES TO D4034-043 (REASON REMOVAL OF PROP ARM OPTION), D5-4 ADDED 2 MORE D4017-7 RIBS TO PREVENT BOWING. MULTIPLE DIMENSIONS RE-TOLERANCED FOR EASE OF MANUFACTURE. SECTION F-F & G-G ADDED.		
B	ADD D4672-1 (ZN C4-1, C6-1, D2-2, D2-3, & D5-2).	REASON: PAR12-197.	AJS 12.06.15
A	NEW ISSUE	JPH	10.03.16
REV.	DESCRIPTION	BY	DATE
DESIGN	AJS	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	AJS	DRAWING NO. D3913	
CHECKED	✓	REV. C SHEET 1 OF 6	
MFG. APPR.	✓	TITLE LONG BASKET BASE ASSY (350) NTS	
APPROVED	✓	SCALE	
DE APPR.	✓	DATE 13.07.18	

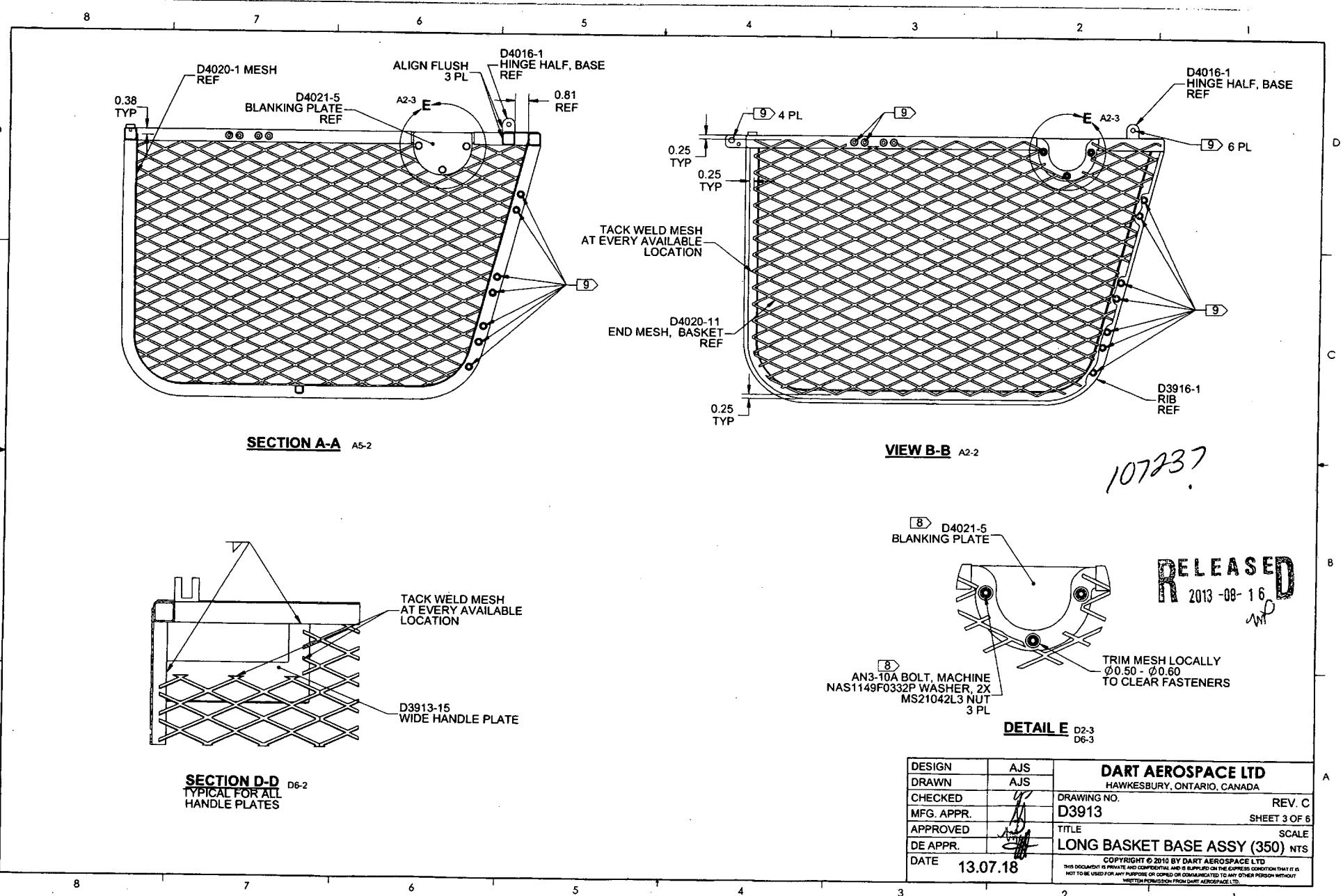
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WRITTEN PERMISSION FROM DART AEROSPACE LTD.

RELEASED
2013-08-16
M

8 7 6 5 4 3 2 1

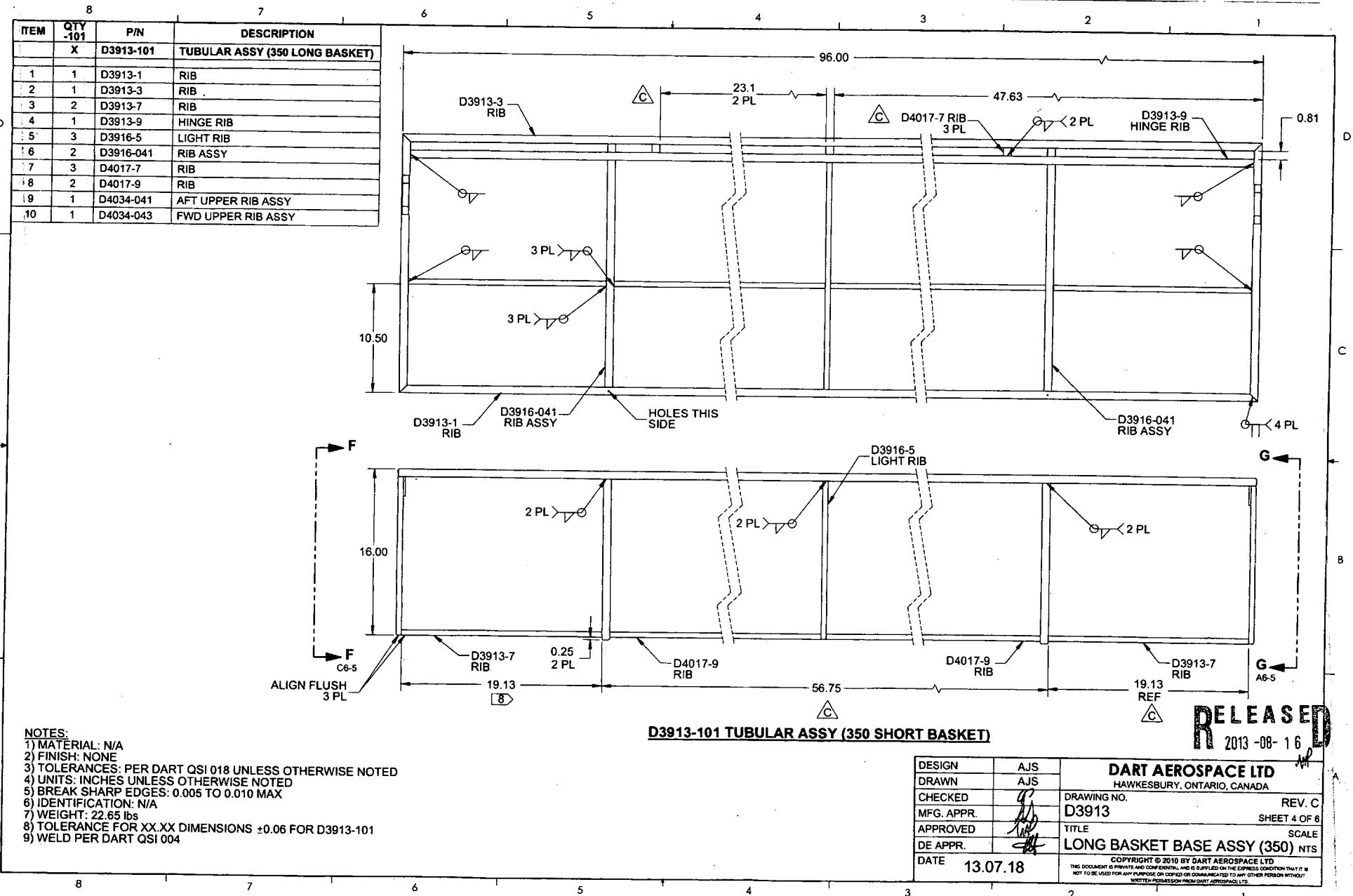


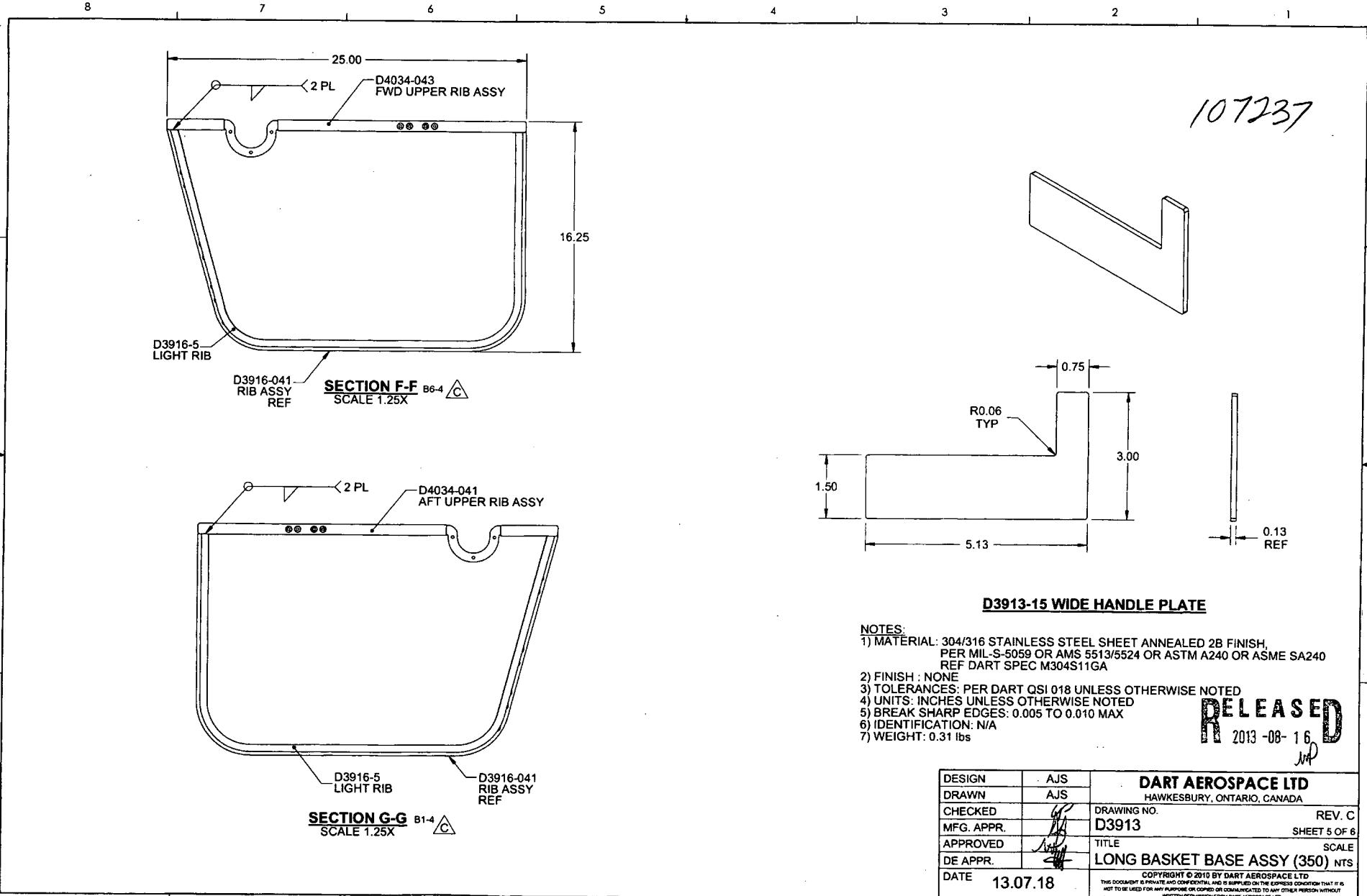
8 7 6 5 4 3 2 1



DESIGN	AJS	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA		
DRAWN	AJS			
CHECKED	<i>[initials]</i>	DRAWING NO.	REV. C	
MFG. APPR.	<i>[initials]</i>	D3913	SHEET 3 OF 6	
APPROVED	<i>[initials]</i>	TITLE	SCALE	
DE APPR.	<i>[initials]</i>	LONG BASKET BASE ASSY (350) NTS		
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107237





D3913-15 WIDE HANDLE PLATE

NOTES:

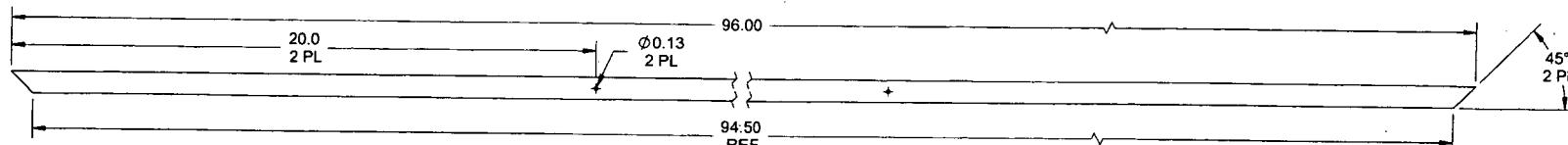
- 1) MATERIAL: 304/316 STAINLESS STEEL SHEET ANNEALED 2B FINISH, PER MIL-S-5059 OR AMS 5513/5524 OR ASTM A240 OR ASME SA240 REF DART SPEC M304S11GA
- 2) FINISH : NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: 0.31 lbs

RELEASED
R 2013 -08- 16
MJ

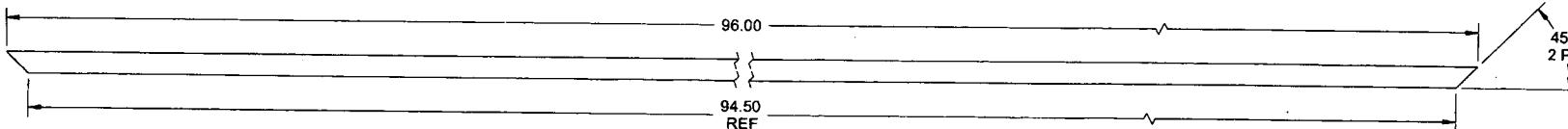
DESIGN	AJS	DART AEROSPACE LTD
DRAWN	AJS	HAWKESBURY, ONTARIO, CANADA
CHECKED	<i>[Signature]</i>	DRAWING NO.
MFG. APPR.	<i>[Signature]</i> <th>D3913</th>	D3913
APPROVED	<i>[Signature]</i> <th>REV. C</th>	REV. C
DE APPR.	<i>[Signature]</i> <th>SHEET 5 OF 6</th>	SHEET 5 OF 6
DATE	13.07.18	SCALE
		LONG BASKET BASE ASSY (350) NTS

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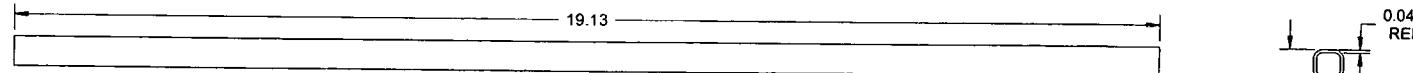
8 7 6 5 4 3 2 1



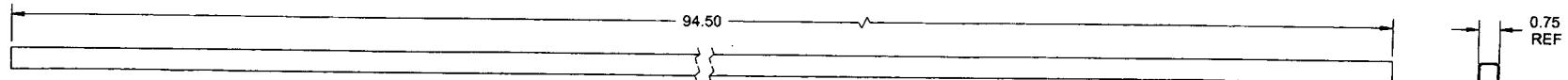
D3913-1 RIB



D3913-3 RIB



D3913-7 RIB



D3913-9 HINGE RIB

NOTES:

1) MATERIAL -1, -3, -9: AISI 304/316 SEAMLESS STAINLESS STEEL SQUARE TUBE, 0.75 X 0.75 X 0.049 WALL
PER ASTM A554 OR ASTM A269 MILL FINISH
REF DART SPEC. M304TS0.750W.049

-7: AISI 304/316 SEAMLESS STAINLESS STEEL SQUARE TUBE, 0.50 X 0.50 X 0.049 WALL
PER ASTM A554 OR ASTM A269 MILL FINISH
REF DART SPEC. M304TS0.500W.049

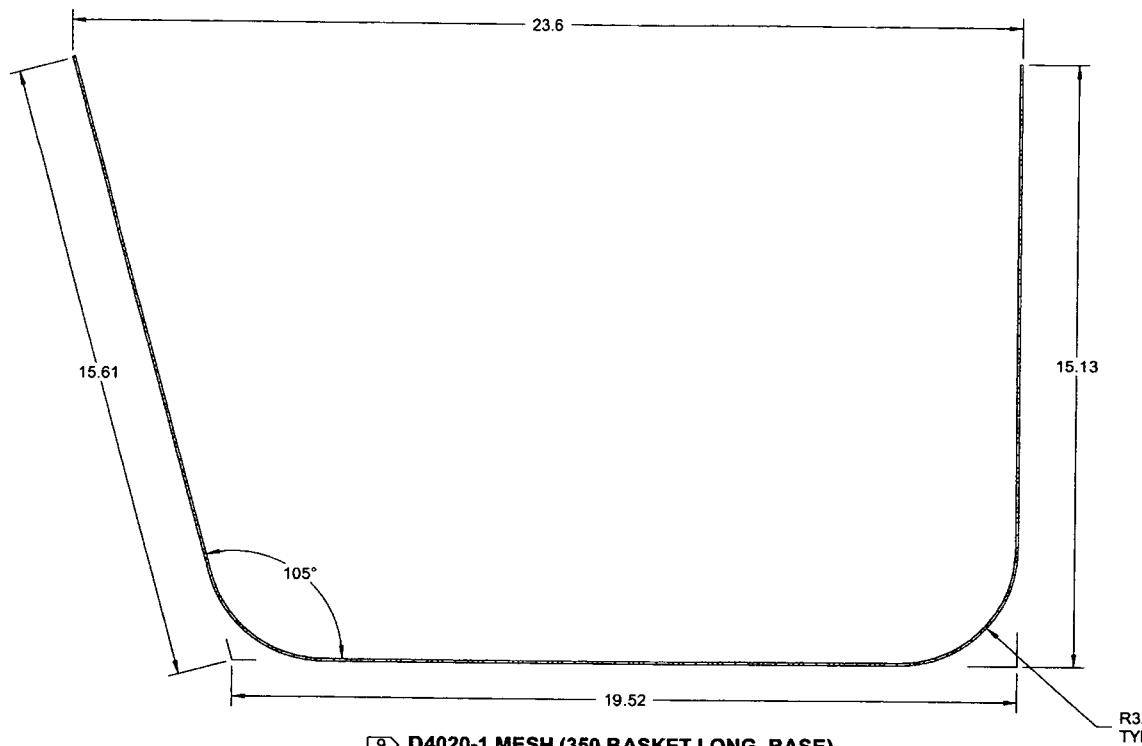
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: SEE ASSEMBLED WEIGHTS

RELEASED
2013-08-16
MW

DESIGN	AJS	DART AEROSPACE LTD	
DRAWN	AJS	HAWKESBURY, ONTARIO, CANADA	
CHECKED	<i>gj</i>	DRAWING NO.	REV. C
MFG. APPR.	<i>gj</i>	D3913	SHEET 6 OF 6
APPROVED	<i>gj</i>	TITLE	SCALE
DE APPR.	<i>gj</i>	LONG BASKET BASE ASSY (350) NTS	
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8 7 6 5 4 3 2 1

8 7 6 5 4 3 2 1



⑨ **D4020-1 MESH (350 BASKET LONG, BASE)**
(SEE D4020-1F FOR LENGTH)

⑨ **D4020-3 (350 BASKET SHORT, BASE)**
(SEE D4020-3F FOR LENGTH)

RELEASED
2010-03-12
NP

NOTES:

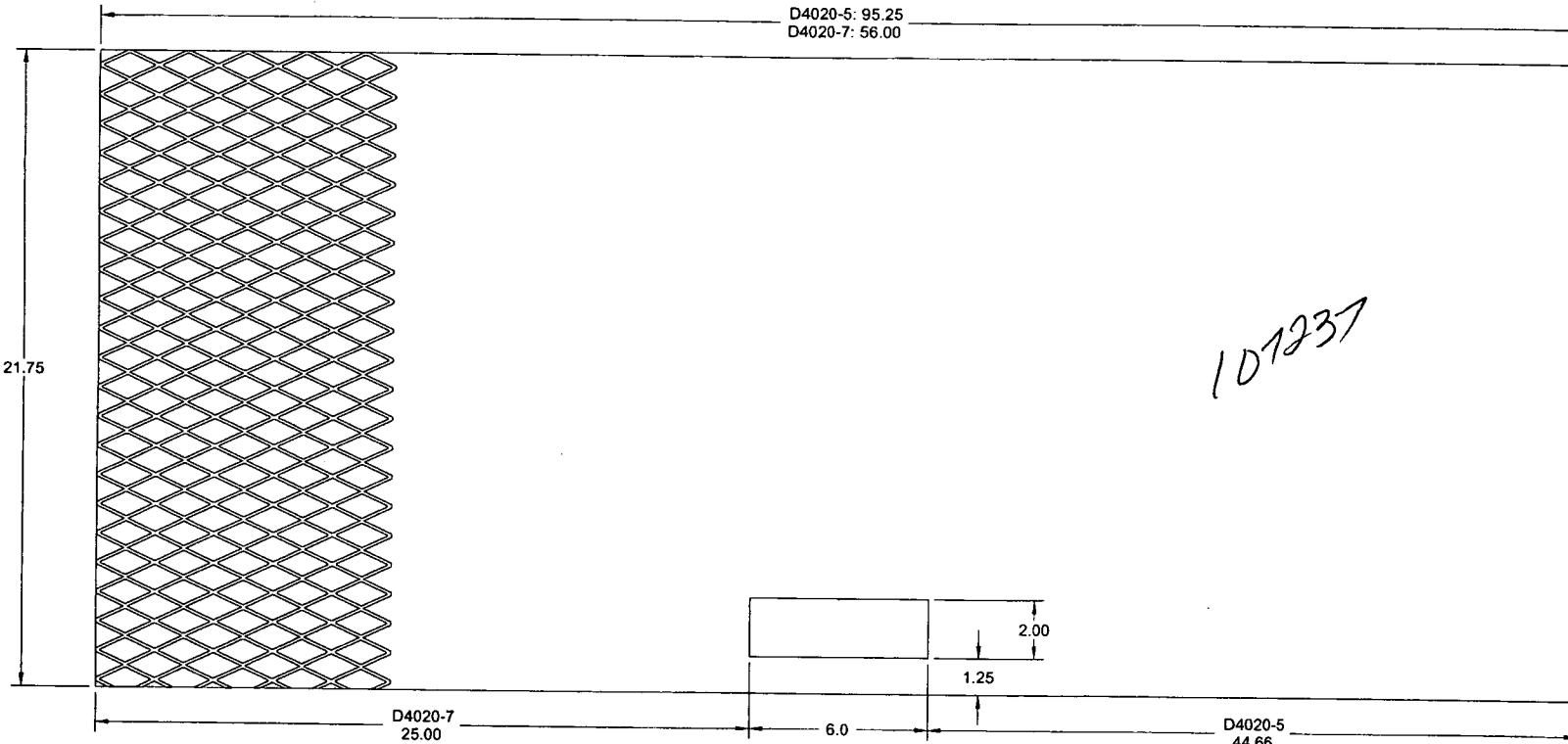
- 1) MATERIAL-1: MAKE FROM D4020-1F
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: SEE D4020-1F & D4020-3F
- 8) LOCAL TRIM MAY BE NECESSARY TO CLEAR FASTENERS/STRUCTURE SEE NEXT ASSY FOR DETAILS
- 9) PRE-FORMING OF MESH PER SHOP OPTION, THIS VIEW MAY BE USED FOR REF ONLY

8 7 6 5 4 3 2 1

A	NEW ISSUE	JPH	10.03.04
REV.	DESCRIPTION	BY	DATE
DESIGN	AJS	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	JPH		
CHECKED	PP		
MFG. APPR.	PP		REV. A
APPROVED	NP		SHEET 1 OF 4
DE APPR.	NP	TITLE	SCALE
DATE	10.03.04	350 BASKET MESH (BASE)	NTS

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8 7 6 5 4 3 2 1



⑨ **D4020-5 MESH (350 BASKET LONG. LID)**
(LOCAL SECTION MESH SHOWN FOR CLARITY)

⑨ **D4020-7 MESH (350 BASKET SHORT. LID)**
(LOCAL SECTION MESH SHOWN FOR CLARITY)

NOTES:
1) MATERIAL: AISI 304/316 EXPANDED STAINLESS STEEL MESH 3/4-16F
REF DART SPEC. M304EX0.75-16F
2) FINISH: NONE
3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
4) UNITS: INCHES UNLESS OTHERWISE NOTED
5) BREAK SHARP EDGES: N/A
6) IDENTIFICATION: N/A
7) WEIGHT -5: 0.80 lbs APPROX
7: 4.49 lbs APPROX
8) LOCAL TRIM MAY BE NECESSARY TO CLEAR FASTENERS/STRUCTURE SEE NEXT ASSY FOR DETAILS
9) TOLERANCE ON XX.XX DIMENSIONS ± 0.06 .

8 7 6 5 4 3 2 1

RELEASED
2010-03-12
JAD

DESIGN	AJS	DART AEROSPACE LTD	
DRAWN	JPH	HAWKESBURY, ONTARIO, CANADA	
CHECKED	Q	REV. A	
MFG. APPR.	E	D4020	SHEET 2 OF 4
APPROVED	JAD	TITLE	SCALE
DE APPR.	M	350 BASKET MESH (BASE)	NTS
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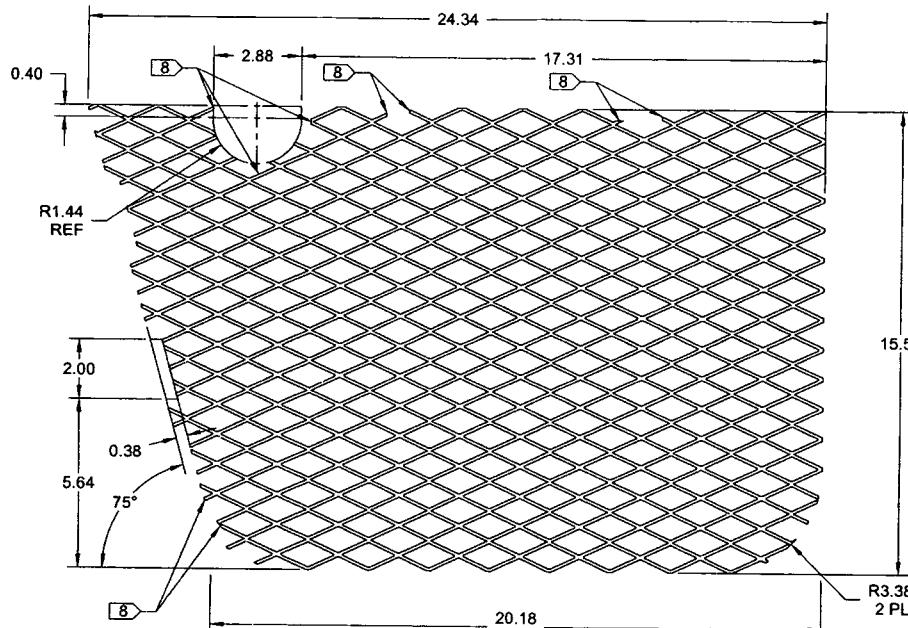
8 7 6 5 4 3 2 1

D

C

B

D



107237

RELEASED
2010-03-12
MWD

NOTES:

- 1) MATERIAL: AISI 304/316 EXPANDED STAINLESS STEEL MESH 3/4-16F
REF DART SPEC. M304EX0.75-16F
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: 1.22 lbs
- 8) LOCAL TRIM MAY BE NECESSARY TO CLEAR FASTENERS/STRUCTURE SEE NEXT ASSY FOR DETAILS
- 9) TOLERANCE ON XX.XX DIMENSIONS ± 0.06 .

DESIGN	AJS	DART AEROSPACE LTD	
DRAWN	JPH	HAWKESBURY, ONTARIO, CANADA	
CHECKED	<i>GR</i>		
MFG. APPR.	<i>EZ</i>	REV. A	
APPROVED	<i>LW</i>	D4020	SHEET 3 OF 4
DE APPR.	<i>MM</i>	TITLE	SCALE
DATE	10.03.04	350 BASKET MESH (BASE)	NTS

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8 7 6 5 4 3 2 1

